

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	'D N.C.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>		19	1-8-01
<b>FORMALITY REVIEW</b>	A-M	JL 580	01-22-01
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1 ✓ ✓	4
14 ✓ ✓	19
2 ✓ ✓	9
3 ✓ ✓	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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